PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

maintenance fee notification								
	E ADDRESS (Note: Use Block 1 for a	any change of address)	/12	Fee(s) Transmittal. T papers. Each addition	f mailing can only be used for his certificate cannot be used nal paper, such as an assignment	for any other accompanying		
26853 75	590 10/27/2004		ક્	have its own certifica	te of mailing or transmission.			
COVINGTON &		JAN 2 6 201	ng 73]	Ce	ertificate of Mailing or Trans	smission		
ATTN: PATENT I		1 0/4 2	W (7)	States Postal Service	this Fee(s) Transmittal is bein with sufficient postage for fir	st class mail in an envelope		
1201 PENNSYLVA WASHINGTON, I	ANIA AVENUE, N.W. DC 20004-2401	12		I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimila transmitted to the USPTO (703) 746-4000, on the date indicated below.				
		TRADENA	N. S.			(Depositor's name) (Signature)		
						(Date)		
APPLICATION NO.	FILING DATE	FIRST NA	MED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/713,039	11/17/2003	Sha	wn L. Lyons		000166.0075-US04	1145		
TITLE OF INVENTION: A	PPARATUS AND METHO	D FOR PREPARING MIC	ROPARTICI	LES				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	Pt	IBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1370		\$300	\$1670	01/27/2005		
EXAM	EXAMINER		CI	ASS-SUBCLASS] .			
ACQUAH,	SAMUEL A	1711		264-004100				
. Change of correspondence CFR 1.363).	e address or indication of "Fe			the patent front page,	. Andron	G. Reister		
	lence address (or Change of (22) attached.	Correspondence (1) th	e names of u ents OR, alter	ip to 3 registered pate matively,	ent attorneys			
□ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			the name of a single firm (having as a member a stered attorney or agent) and the names of up to gistered patent attorneys or agents. If no name is d, no name will be printed.					
B. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON THE PAT	ENT (print o	or type)		* - **		
					gnee is identified below, the c	document has been filed for		
(A) NAME OF ASSIGN	EE	(B) RESID	ENCE: (CIT	Y and STATE OR CO		2 00000029 10713039		
Alkermes Cont	rolled Therape	itics Inc. II,	. Ca	mbridge, Ma	01 FC:1501 ISSAC BAISE TTS 03 FC:8001	1400.00 300.00		
Please check the appropriate	e assignee category or catego	ries (will not be printed on	the patent):	Individual	Corporation or other private gr	30.00 coup entity Government		
a. The following fee(s) are		4b. Paymer	nt of Fee(s):			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Issue Fee				nount of the fee(s) is e				
Publication Fee (No small entity discount permitted) Advance Order - # of Copies 10 The Director is hereby authorized by charge the required fee(s), or credit any overpaymen Deposit Account Number 50-0740 (enclose an extra copy of this form).								
Advance Order - # of	Copies IU	Deposit	Account Nu	mber <u>50-0740</u>	(enclose an extra c	copy of this form).		
	(from status indicated above		••			TED 1.05()(2)		
	MALL ENTITY status. See	·			ALL ENTITY status. See 37 C	·		
The Director of the USPTO NOTE: The Issue Fee and P nterest as shown by the rec	is requested to apply the Issu sublication Fee (if required), ords of the United States Pate	vill not be accepted from are ent and Trademark Office.	(if any) or to iyone other t	re-apply any previous han the applicant; a re	sly paid issue fee to the applic gistered attorney or agent; or t	ation identified above. he assignee or other party in		
Authorized Signature	inver &	leist	_	Date	January 26, 2005	<u> </u>		
Typed or printed name Andrea G. Reister Registration No. 36, 2								
This collection of informatic an application. Confidential submitting the completed a his form and/or suggestions Box 1450, Alexandria, Virg Alexandria. Virginia 22313-	ity is governed by 35 U.S.C. pplication form to the USPT s for reducing this burden, sh inia 22313-1450. DO NOT	11. The information is requ 122 and 37 CFR 1.14. Thi O. Time will vary dependi tould be sent to the Chief I SEND FEES OR COMPLE	ired to obtain is collection ng upon the information C ETED FORM	or retain a benefit by is estimated to take 12 individual case. Any officer, U.S. Patent an IS TO THIS ADDRES	the public which is to file (and minutes to complete, including comments on the amount of the darage	d by the USPTO to process) ng gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,		

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Effective on 12/08/200		Complete if Known										
Fees pursuant to the Consolidated Appropriate	Application Number 1		10/713,039									
FEE TRANSM			lovember 17,									
For FY 200	First Named Inve	entor Shawn L. Lyons										
10111200	Examiner Name S. A. Acqua											
Applicant claims small entity status.	Art Unit 1711											
TOTAL AMOUNT OF PAYMENT	Attorney Docket No. 000166.0075			·US04								
METHOD OF PAYMENT (check all that apply)												
X Check Credit Card Money Order None Other (please identify):												
Deposit Account Number: 50-0740 Deposit Account Name: Covington & Burling												
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)												
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee												
Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17												
FEE CALCULATION												
1. BASIC FILING, SEARCH, AND EXAMINATION FEES												
		ARCH FEES	EXAMINA	ATION FEES								
Application Type Fee (\$)	Small Entity	Small Entity	Eoo (\$)	Small Entity	Fees Pa	aid (\$)						
Application Type Fee (\$) Utility 300	Fee (\$) Fee (\$) <u>Fee (\$)</u> 250	Fee (\$) 200	<u>Fee (\$)</u> 100	rees re	110 (#)						
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Plant 200	100 300	150	160	80								
Reissue 300	150 500	250	600	300								
Provisional 200	100 0	0	0	0								
2. EXCESS CLAIM FEES					<u>S</u> Fee (\$)	Fee (\$)						
Fee Description	ah alaim ayar 20 and n	ore than in the or	iginal pater	n#								
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<u>Total Claims</u> <u>Extra Claims</u> x	aid (\$) Multiple Depend			Fee Paid (\$)								
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Indep. Claims Extra Claims	Fee (\$) Fee F	Paid (\$)				-						
3 -3= x	=											
3. APPLICATION SIZE FEE												
If the specification and drawings exce	ed 100 sheets of paper,	the application size	ze fee due	is \$250 (\$125	for small ent	tity)						
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).												
Total Sheets Extra Sheets		dditional 50 or fract			<u>Fee Pa</u>	aid (\$)						
- 100 = /50 (round up to a whole number) x =												
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)												
Other: 1501 Utility issue fee	1,400.00											
8001 Printed copy of pa	30.00											
1504 Publication fee for		300.00										
SUBMITTED BY (1)												
Signature (Induly	Stast	Registration No. (Attorney/Agent)	36,253	Telephone	(202) 662	-6000						
Name (Print/Type) Andrea G. Reister				Date	January 26	3, 2005						

Docket No.: 000166.0075-US04 (PATENT)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

The Patent Application of: Shawn L. Lyons et al.

Application No.: 10/713,039

Group Art Unit: 1711

Filed: November 17, 2003

Examiner: S. A. Acquah

For: APPARATUS AND METHOD FOR PREPARING MICROPARTICLES

TRANSMITTAL LETTER

MS Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

- 1. Fee Transmittal;
- 2. Fee(s) Transmittal (Form PTOL-85B);
- 3. Check No. 339684 for \$1,730.00 to cover:

\$1,400.00 issue fee;

\$300.00 publication fee;

\$30.00 advance patent copies fee; and

4. Return receipt postcard.

The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this

DC: 1676407-1

application by this firm) to our Deposit Account No. 50-0740, under Docket No. 000166.0075-US04. A duplicate copy of this paper is enclosed.

It is not believed that extensions of time fees are required beyond those that may otherwise be provided for in documents accompanying this paper. However, if additional extensions of time are necessary to prevent abandonment of this application, then such extensions of time are hereby petitioned under 37 C.F.R. § 1.136(a), and any fees required therefor are hereby authorized to be charged to our Deposit Account No. 50-0740.

Dated: January 26, 2005

Respectfully submitted,

Andrea G. Reister

Registration No. 36,253 COVINGTON & BURLING

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Washington, DC 20004-2401

(202) 662-6000

Attorney for Applicant